

Mississippi Secretary of State
 700 North Street P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME Mississippi State Personnel Board		CONTACT PERSON Sara DeLoach Special Assistant Attorney General Mississippi State Personnel Board	TELEPHONE NUMBER 601-359-2708	
ADDRESS 210 East Capitol Street, Suite 800		CITY Jackson	STATE MS	ZIP 39201
EMAIL Sara.deLoach@mspb.ms.gov	SUBMIT DATE 11/15/11	Name or number of rule(s): Section 1.2, Public Records Act Requests, of the MSPB Policy & Procedures Manual		

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: Revision of Section 1.2, Public Records Act Requests, of the MSPB Policy & Procedures Manual to change the address of the MSPB and to make changes to comply with Miss. Code Ann. § 25-61-5.

Specific legal authority authorizing the promulgation of rule: Miss. Code Ann. § 25-9-103, 119

List all rules repealed, amended, or suspended by the proposed rule: Mississippi State Personnel Board Policy & Procedures Manual Section 1.2, Public Records Act Request.

ORAL PROCEEDING:

☐ An oral proceeding is scheduled for this rule on Date: _____ Time: _____ Place: _____

☒ Presently, an oral proceeding is not scheduled on this rule.


If an oral proceeding is not scheduled, an oral proceeding must be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) or more persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address, email address, and telephone number of the person(s) making the request; and, if you are an agent or attorney, the name, address, email address, and telephone number of the party or parties you represent. At any time within the twenty-five (25) day public comment period, written submissions including arguments, data, and views on the proposed rule/amendment/repeal may be submitted to the filing agency.

ECONOMIC IMPACT STATEMENT:

☒ Economic impact statement not required for this rule. ☐ Concise summary of economic impact statement attached.

TEMPORARY RULES _____ Original filing _____ Renewal of effectiveness To be in effect in _____ days Effective date: _____ Immediately upon filing _____ Other (specify): _____	PROPOSED ACTION ON RULES Action proposed: _____ New rule(s) _____ Amendment to existing rule(s) _____ Repeal of existing rule(s) _____ Adoption by reference Proposed final effective date: _____ 25 days after filing _____ Other (specify): _____	FINAL ACTION ON RULES Date Proposed Rule Filed: <u>10/20/2011</u> Action taken: <input checked="" type="checkbox"/> Adopted with no changes in text _____ Adopted with changes _____ Adopted by reference _____ Withdrawn _____ Repeal adopted as proposed Effective date: <input checked="" type="checkbox"/> 30 days after filing _____ Other (specify): _____
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Printed name and Title of person authorized to file rules: Sara DeLoach, Special Assistant Attorney General
 Signature of person authorized to file rules: *Sara DeLoach*

OFFICIAL FILING STAMP <div style="border: 1px solid black; height: 150px; width: 100%;"></div> Accepted for filing by _____	DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP <div style="border: 1px solid black; height: 150px; width: 100%;"></div> Accepted for filing by _____	OFFICIAL FILING STAMP <div style="border: 1px solid black; padding: 10px; text-align: center;">  </div> Accepted for filing by <u>CB18224E</u>
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The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.